



State of Washington
Application for a Water Right

3/5/2009
Duplicate
APP

For Ecology Use
Fee Paid _____
Date _____

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name FLAURA'S ACRES PROPERTY OWNERS ASSN Home Tel: (____) _____
Mailing Address PO Box 1641 Work Tel: (____) _____
City SEQUIM State WA Zip+4 98382 FAX: (____) _____

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name N.V. MIMI STIRLING Home Tel: (360) 582 - 0348
Mailing Address 941 E BLAIR AVE Work Tel: (____) _____
City SEQUIM State WA Zip+4 98382 + FAX: (____) _____
Relationship to applicant SECRETARY/TREASURER OF THE ASSOCIATION

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 65 ☒ gallons per minute or
☐ cubic feet per second) from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s)
of MULTIPLE DOMESTIC SUPPLY. ATTACH A "LEGAL"
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not
sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year: 29.34

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From ____/____/____ to ____/____/____

Section 4. WATER SOURCE

IF SURFACE WATER					IF GROUNDWATER			
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:					A permit is desired for <u>1</u> well(s).			
Number of diversions: <u>N/A</u>								
Source flows into (name of body of water):					Size & depth of well(s): <u>8" APPROXIMATELY 80 FT DEEP</u>			
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>1190' FT. NORTH AND 200' FT. EAST OF THE SOUTH QUARTER CORNER OF SECTION 20 IN CHALLAM COUNTY</u>								
1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SW 1/4</u>	<u>SE 1/4</u>	<u>20</u>	<u>30N</u>	<u>3W</u>	<u>CHALLAM</u>			<u>FLAURA'S ACRES</u>
For Ecology Use Date Received: _____ Priority Date: _____								
SEPA: Exempt/Not Exempt _____ FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete _____ By _____ Date Returned _____ By _____ WRIA: _____								

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: FLAVOR'S ACRES PROPERTY OWNERS ASSN
- B. Briefly describe your proposed water system. (See instructions.)

EXISTING SYSTEM - SEE LAYOUT & WATER RIGHTS ATTACHED

- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 50 Type of connection HOUSES
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☒ YES ☐ NO
If yes, when was it approved? 1966 Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
 - ‡ Acreage proposed to be irrigated under this application;
 - ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no.: _____
- E. Farm uses:
- Stockwater - Total # of animals _____ Animal Type _____ (If dairy cattle, see below)
- Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

TAKE BROWN ROAD SOUTH FROM WASHINGTON (US101) APPROX 1/4 MILE. ROAD
MAKES A 90° TURN TO THE EAST. ^{BECOMES HAMMOND.} WELL IS LOCATED APPROX 300' FROM
THE BEND ON THE SOUTH SIDE OF THE ROAD. A SMALL CONCRETE
BLOCK PUMPHOUSE SURROUNDED BY CHAIN LINK FENCING IS ON THE
SITE AS WELL AS A SMALL PUMPHOUSE. (SEE PLAT MAP)

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

FLAURA'S ACRES RESIDENTS USE THE
WATER. (SEE PLAT MAP)
MULTIPLE DOMESTIC SUPPLY

B. Does the applicant own the land on which the water source is located?

☐ YES ☒ NO

If no, submit a copy of agreement:

DECLARATION OF PROTECTIVE RESTRICTIONS

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

N.V. STIRLING

SECRETARY/TREASURER FOR FLAURA'S ACRES PROPERTY OWNERS ASSN.

N.V. Stirling
Applicant (or authorized representative)

2-28-01
Date

SEE PROTECTIVE RESTRICTIONS
Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

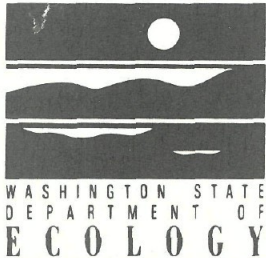
WELL # 2 IS ACTUALLY THE ORIGINAL WELL OF THIS PROPERTY WHICH WAS USED WHEN DEVELOPING FLAHER'S ACRES. WELL # 1 WAS DRILLED IN 1966 & WELL # 3 DRILLED IN 1994. WELL # 3 & # 1 ARE IN USE TODAY AND WE WISH TO KEEP WELL # 2 AS AN EMERGENCY WATER SOURCE.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).



APPLICATION FOR PERMIT

TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

☐ SURFACE WATER☒ GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION

(GRAY BOXES FOR OFFICE USE ONLY)

DEPARTMENT OF ECOLOGY
S.W. REGIONAL OFFICE

APPLICATION NO. G-2-29203	W.R. LA 18	COUNTY Clallam	PRIORITY DATE 8/1/95	TIME 95 AUG -1 19:17	ACCEPTED 9
APPLICANT'S NAME — PLEASE PRINT FLAURA'S ACRES HOMEOWNERS ASSOCIATION					Bus. Tel. 452-3023
P.O. BOX 1641 SEQUIM WA 98382-1641					Home Tel.
ADDRESS (STREET) (CITY) (STATE) (ZIP CODE) 40 4 SEASONS Engineering, Inc. 620 EAST Front St. Port Angeles WA 98362					Other Tel.
DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION					

1. SOURCE OF SUPPLY	
IF SURFACE WATER	IF GROUND WATER
SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE) 18 18: [] not an Pond	SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.) Well #2
TRIBUTARY 8/8/95 DATE	SIZE AND DEPTH 8" ϕ Completed To 100 Ft \pm No well log Available
2. USE	
USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.) DOMESTIC SUPPLY Multiple	
ENTER QUANTITY OF WATER REQUESTED USING UNITS OF: CUBIC FEET PER SECOND (CFS) OR GALLONS PER MINUTE (GPM) 65	ACRE FEET PER YEAR 30

TIMES DURING YEAR WATER WILL BE REQUIRED

YEAR ROUND

IF IRRIGATION, NUMBER OF ACRES —	IF DOMESTIC USE, NUMBER OF UNITS BY TYPE, E.G. 1-HOME, 1-MOBILE HOME, 2-CAMPSITES, ETC. 55	IF MUNICIPAL USE, ESTIMATED POPULATION 20 YEARS FROM TODAY 150
DATE PROJECT WAS OR WILL BE STARTED Well Drilled in 1975	DATE PROJECT WAS OR WILL BE COMPLETED 1975	

3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL					
3A. IF IN PLATTED PROPERTY					
LOT TRACT A	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION) FLAURA'S Acres	SECTION 20	TOWN 30N	RANGE 3W
ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION					

3B. IF NOT IN PLATTED PROPERTY				
ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION, SHOW NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER				
ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL. APPROX 650' N + 395' E of the South Quarter corner of Sec 20				
LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION) SW 1/4 SE 1/4	SECTION 20	TOWNSHIP N. 30	RANGE (E. OR W.) W.M. 3W	COUNTY Clallam

4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED
ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.

THAT PORTION OF THE SW 1/4 SE 1/4 OF SECTION 20, TWP 30N, R 3W, W.M.
LYING North OF THE C.M. AND S.F. RAIL R.W.

WATER IS PROVIDED TO THE PLAT OF FLAURA'S ACRES.

WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH THE WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTRACT PURCHASER, ETC.)

OWNER

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

☒ YES ☐ NO

IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

Well #1 AND Well #3 Ground water, Deeper Aquifer

6. DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

65 gpm pump in Existing well to be utilized. This has been on line for many years, but over drafted, leading to development of well #3 (now Permitted).

REMARKS

7. SEE ALSO ~~Permit~~ Certificate # 13 PAGE 6171-A This ~~is~~ permit covers the well field.

8. COMPLETE THIS SECTION ONLY IF THIS APPLICATION INCLUDES IRRIGATION AS A USE

IN ORDER TO IMPLEMENT THE PROVISIONS OF INITIATIVE MEASURE NUMBER 59, THE FAMILY FARM WATER ACT WHICH WAS PASSED BY THE VOTERS ON NOVEMBER 3, 1977, WE MUST ASK THE FOLLOWING QUESTIONS:

DOES THE TOTAL NUMBER OF ACRES IN WHICH YOU HAVE CONTROLLING INTEREST IN THE STATE OF WASHINGTON EXCEED 2000 ACRES FOR THE FOLLOWING THREE CATEGORIES:

- | | | |
|---|------------------------------|-----------------------------|
| 1. LANDS THAT ARE BEING IRRIGATED UNDER WATER RIGHTS ACQUIRED AFTER DECEMBER 8, 1977. | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 2. LANDS THAT MAY BE IRRIGATED UNDER APPLICATIONS NOW ON FILE WITH THE DEPARTMENT OF ECOLOGY. | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 3. LANDS THAT MAY BE IRRIGATED UNDER THIS APPLICATION. | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

FLAURA'S Acres Home Owners Association
LEGAL LANDOWNERS NAME
(PLEASE PRINT)

Jay S. Petersen PE. 4SEASONS Engineering Inc
APPLICANT'S SIGNATURE

FOR FLAURA'S Acres Home Owners Assoc.
LEGAL LANDOWNER'S SIGNATURE (OWNER OF PROPERTY DESCRIBED IN ITEM NUMBER 5)

P.O. Box 1641 SEQUIM WA 98382
LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON }
DEPARTMENT OF ECOLOGY } SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

.....
.....

In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before, 19.....

Witness my hand this..... day of, 19.....